

BOARD OF REGISTERED NURSING

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CRITERIA FOR FURNISHING NUMBER UTILIZATION BY NURSE PRACTITIONERS

HISTORY

The passage of AB 1077 (Chapter 455) amended the Nurse Practitioner (NP) furnishing law, effective January 1, 1997. Prior to the amendment, the Nursing Practice Act, Business and Professions (B&P) Code Section 2836.1, authorized nurse practitioners (NPs) to obtain and utilize a “furnishing number” to furnish drugs and/or devices. Furnishing is defined as “the act of making a pharmaceutical agent or agents available to the patient in strict accordance with standardized procedures.”

AB 1077 (Chapter 455) 1997 amended Business and Professions Code Section 2836.1 giving NPs the authority to furnish Schedule III through Schedule V controlled substances listed in the California Uniform Controlled Substance Act, Division 10 (commencing with Section 11000) of the Health and Safety Code.

Following the enactment of AB 1077 (Chapter 455) 1997, the Drug Enforcement Administration (DEA) determined that the new law did not afford prescriptive authority to NPs. Rather, furnishing is a delegated authority utilizing standardized procedures. The DEA requires prescriptive authority to obtain a DEA registration number. In order for NPs to furnish controlled substances as authorized by AB 1077 (Chapter 455), the law needed to be amended to include prescriptive privileges.

SB 816 (Chapter 741) 1/2000 amended Business and Professions Code, Section 2836.1. This new law added “order” and “drug order” to Section 2836.1. The new law changed furnishing of controlled substances Schedule III through V to mean issuing an “order” for a drug. The intent of this legislation was furnishing could now be known as an “order” and could be considered the same as an “order” initiated by the physician. This new law required the NP who has a furnishing number to obtain a DEA number to “order” controlled substances, Schedule III, IV, V.

AB 1196, (Chapter) 748 1/2004 amended Business and Professions Code Section 2836.1 and expanded furnishing authority to Schedule II controlled substances under the California Uniform Controlled Substance Act. This new law’s effective date is January 1, 2004. Other provisions of this law added to B&P Code Section 2836.1: the Schedule II controlled standardized procedure or protocols shall address the diagnosis of the illness, injury, or condition for which the Schedule II controlled substance is to be furnished. Drugs and devices furnished or ordered by a NP may include Schedule II through V and are limited to those drugs and devices agreed upon by the NP, physician and surgeon and specified in the standardized procedure. Schedule II and III controlled substances furnished by the NP are furnished or ordered in accord with a patient-specific protocol approved by the treating physician. NPs who are BRN certified and have an active furnishing number, authorized by standardized procedure or protocol to furnish Schedule II controlled substance, and registered with the United States Drug Enforcement Administration, DEA number, must also complete, as part of continuing education requirements, a course including Schedule II controlled substances based on the standards developed by the Board of Registered Nursing.

The amended B&P Code Section 2836.1 extends the NPs' furnishing authority to include Schedule II through V controlled substance furnished or ordered that can be considered the same as an order initiated by the physician. The NP must obtain a DEA registration number to furnish Schedule II through V.

AB 2560, (Chapter 205) July 27, 2004 Amended Business and Professions Code 2836.1 and authorizes a nurse practitioner to furnish drugs or devices under the standardized procedures or protocols when the drugs and devices furnished or ordered are consistent with the practitioner's educational level preparation or for which clinical competency has been established and maintained. The new amendments to Business and Professions Code 2836.1 no longer requires the circumstances to include furnish incidental to provision of family planning services, provision of routine health care in prenatal care, reduced to essentially health people.

PRACTICE REQUIREMENTS

The following criteria must be met by the NP in order to utilize the furnishing number to furnish drugs and/or devices pursuant to B&P Code Section 2836.1.

Furnishing Number

Include the furnisher's name and furnishing number on the prescription transmittal order form for drugs, devices, or both. Prescription pads may be used as a transmittal order form as long as they contain the furnisher's name and furnishing number. The NP's DEA number is also required on the prescription transmittal form for Schedule II, III, IV, or V controlled substance. Pharmacy law requires a physician's name on the drug or device container label. As of January 1, 2000, AB 1545 (Chapter 914) amended the pharmacy law and now requires that the pharmacist ~~to~~ also include the NP's name on the container label.

The drugs and devices are furnished by a nurse practitioner in accordance with standardized procedures or protocols developed by the nurse practitioner and supervising physician and surgeon. **When the drugs or devices furnished or ordered are consistent with the practitioner's educational preparation or for which clinical competency has been established and maintained** (AB 2560, [Montañez], Chapter 205, effective date July 27, 2004).

Furnishing Controlled Substances

The NP is required to have a furnishing certificate from the Board of Registered Nursing and a Drug Enforcement Administration registration number.

The furnishing of drugs including controlled substances shall be further limited to those drugs agreed upon by the NP and physician and specified in the standardized procedure. When Schedule II controlled substance is furnished or ordered the protocols shall address the diagnosis of the illness, injury, or condition for which the Schedule II controlled substance is to be furnished. The NP authorized to furnish Schedule II by approved standardized procedure, who has a United States DEA number, shall complete, as part of their continuing education requirement, a course including Schedule II controlled substance based on the standards developed by the BRN.

When Schedule II and III controlled substances, as defined in Sections II055 and II056 of the Health and Safety Code, are furnished by an NP, the controlled substances shall be furnished in accordance with a patient-specific protocol contained within the standardized procedure and approved by the treating or supervising physician. A copy of the section of the NP's standardized procedures relating to controlled substances shall be provided upon request to any licensed pharmacist who dispenses drugs or devices when there is uncertainty about the furnishing transmittal order.

A patient-specific protocol as required for NPs to furnish Schedule II and III controlled substances is a protocol contained within the standardized procedures that specifies which categories of patients may be furnished this class of drugs. The protocol may state any other limitations as agreed upon by the NP and

the supervising physician, such as the amount of the substance to be furnished, or the criteria for consultation. Pursuant to Health and Safety Code Section II200(b), “no prescription for a Schedule III or IV substance may be refilled more than five times in an amount, for all refills of the prescription taken together, exceeding a 120 day supply.”, and pursuant to Section II200(c), “no prescription for Schedule II substances may be refilled.” Prescription for furnishing Schedule II through V refers to “order” for the written prescription transmittal order.

Furnishing: Sign for the Request and Receipt of Pharmaceutical Samples and Devices.

Certified nurse midwives, nurse practitioners and physician assistants are authorized to sign for the request and receipt of complimentary samples of dangerous drugs and devices identified in their standardized procedures or protocols that have been approved by the physician per Senate Bill 1558 (Figueroa), Chapter 263, signed by Governor Gray Davis on August 24, 2002, to take effect immediately. This new law amends B&P Code Section 4061 of the pharmacy law to allow CNMs, NPs, and PAs to request and sign for complimentary samples of medication and devices.

Standardized Procedure

Furnishing the drugs or devices must be in accordance with standardized procedures as defined in Business and Professions Code Sections 2725 and 2836.1 of the Nursing Practice Act. An example of a patient-specific protocol for Schedule III drug follows. A drug formulary may be incorporated into the standardized procedure as described in the Board’s advisory statement, “EXPLANATION OF STANDARDIZED PROCEDURE REQUIREMENTS FOR NURSE PRACTITIONER PRACTICE.”

Sites

AB 2560 (Montañez) added acute care facilities as those facilities where NPs may furnish drugs and devices (Health & Safety Code 1250).

Effective January 1, 2003, B&P Code Section 2836.1 is amended to allow NPs to use their furnishing authority in solo practice per Senate Bill 933 (Figueroa) Chapter 764 signed by Governor Gray Davis on September 20, 2002.

Physician Supervising

Furnish the drugs and/or devices under the supervision of a physician. BRN approval of the supervising physician is not required. For furnishing purposes, the physician may supervise a maximum of not more than four NPs at one time. The physician must be available by telephonic contact at the time of the patient examination by the nurse practitioner.

Patient Education

Prior to the furnishing of drugs or devices, the NP must provide appropriate educational information to the patient.

Other BRN advisory statements related to furnishing of drugs may be obtained from either BRN offices or the Web site.

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